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**State:** Illinois **Filing Company:** ACE American Insurance Company  
**TOI/Sub-TOI:** 11.0 Medical Malpractice - Claims Made/Occurrence/11.0027 Psychology  
**Product Name:** 13-MR-2010290  
**Project Name/Number:** Premium Installment Fee Filing - Psychologists Program/13-MR-2010290

## Filing at a Glance

Company: ACE American Insurance Company  
Product Name: 13-MR-2010290  
State: Illinois  
TOI: 11.0 Medical Malpractice - Claims Made/Occurrence  
Sub-TOI: 11.0027 Psychology  
Filing Type: Rule  
Date Submitted: 01/31/2013  
SERFF Tr Num: ACEH-128868716  
SERFF Status: Closed-Filed  
State Tr Num: ACEH-128868716  
State Status:  
Co Tr Num: 13-MR-2010290  
  
Effective Date: On Approval  
Requested (New):  
Effective Date: On Approval  
Requested (Renewal):  
Author(s): Viola McBride  
Reviewer(s): Gayle Neuman (primary)  
Disposition Date: 02/01/2013  
Disposition Status: Filed  
Effective Date (New): 01/31/2013  
Effective Date (Renewal): 01/31/2013

State Filing Description:

**State:** Illinois **Filing Company:** ACE American Insurance Company  
**TOI/Sub-TOI:** 11.0 Medical Malpractice - Claims Made/Occurrence/11.0027 Psychology  
**Product Name:** 13-MR-2010290  
**Project Name/Number:** Premium Installment Fee Filing - Psychologists Program/13-MR-2010290

## General Information

Project Name: Premium Installment Fee Filing - Psychologists Status of Filing in Domicile:  
Program

Project Number: 13-MR-2010290

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 02/01/2013

State Status Changed:

Deemer Date:

Created By: Viola McBride

Submitted By: Viola McBride

Corresponding Filing Tracking Number:

### Filing Description:

ACE American Insurance Company is filing installment fees for premium billing plans for new and renewal business, applicable to its Psychologists' Professional Liability program, in the amount of \$4.50. This installment charge would be applied to the initial down payment, along with any subsequent installment payments. All installment plans are optional, and the policyholder has the ability to pay the premium in full without incurring any installment fees.

The installment payment plans options are:

a.

A quarterly installment premium payment plan shall be offered as follows: (1) an initial payment equal to 25% of the premium due at policy inception; and (2) a second, third and fourth payment equal to 25% of the premium due 3, 6 and 9 months from policy inception, respectively. There is a \$4.50 installment charge added to each payment.

b.

A semi-annual installment premium payment plan may be offered as follows: (1) an initial payment equal to 50% of the premium due at policy inception; and (2) a second payment equal to the remaining 50% balance will be billed within 6 months. There is a \$4.50 installment charge added to each payment.

The Company will not offer such premium installment plans to insureds whose annual premiums are less than \$500, or for premium for any extension of a reporting period of claims made policies.

The Company shall offer such premium installment plans to insureds in the initial offer of the policy; thereafter, the Company may, but need not re-offer such payment plan, but if an insured requests such payment plan at a later date, the Company shall make it available.

Additional or premium resulting from changes to the policy shall be billed or returned immediately as a separate transaction. The installment charge is not considered premium.

We propose to implement this change on new and renewal business at the earliest possible effective date.

## Company and Contact

### Filing Contact Information

Viola McBride, Filing Technician

viola.mcbride@acegroup.com

436 Walnut Street

215-640-5238 [Phone]

WB04G

215-640-4986 [FAX]

Philadelphia, PA 19106

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### Filing Company Information

ACE American Insurance  
Company  
PO Box 1000  
436 Walnut Street  
Philadelphia, PA 19106  
(215) 640-5123 ext. [Phone]

CoCode: 22667  
Group Code: 626  
Group Name: ACE Group  
FEIN Number: 95-2371728

State of Domicile:  
Pennsylvania  
Company Type:  
State ID Number:

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### Filing Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

### State Specific

Refer to our checklists prior to submitting filing ([http://www.idfpr.com/DOI/Prop\\_Cas\\_IS3\\_Checklists/IS3\\_Checklists.htm](http://www.idfpr.com/DOI/Prop_Cas_IS3_Checklists/IS3_Checklists.htm)):  
acknowledged

Refer to our updated (04/06/2007) SERFF General Instructions prior to submitting filing. They have been updated to clarify what rates and rules are required to be filed as well as what rates and rules are not required to be filed. Also, the "Product Name" is the Filing Title and not the Project Number.: Acknowledged

NO RATES and/or RULES ARE REQUIRED TO BE FILED FOR LINES OF COVERAGE SUCH AS COMMERCIAL AUTO (except taxicabs), BURGLARY AND THEFT, GLASS, FIDELITY, SURETY, COMMERCIAL GENERAL LIABILITY, CROP HAIL, COMMERCIAL PROPERTY, DIRECTORS AND OFFICERS, ERRORS AND OMISSIONS, COMMERCIAL MULTI PERIL just to mention a few. However, a Summary Sheet (RF-3) is required to be filed. Please refer to the State Specific Field below for what rates/rules are required to be filed and to our checklists for specific statutes, regulations, etc. :  
[http://insurance.illinois.gov/Prop\\_Cas\\_IS3\\_Checklists/IS3\\_Checklists.asp](http://insurance.illinois.gov/Prop_Cas_IS3_Checklists/IS3_Checklists.asp) .: Acknowledged

Medical Malpractice rates/rules may now be submitted using SERFF effective January 1, 2012.: Acknowledged

The only rates and/or rules that are required to be filed are Homeowners, Mobile Homeowners, Dwelling Fire and Allied Lines, Workers' Compensation, Liquor Liability, Private Passenger Automobiles, Taxicabs, Motorcycles and Group Inland Marine Insurance which only applies to insurance involving personal property owned by, being purchased by or pledged as collateral by individuals, and not used in any business, trade or profession per Regulation Part 2302 which says in part, "each company shall file with the Director of Insurance each rate, rule and minimum premium before it is used in the State of Illinois.":

Acknowledged

When selecting a form filing type for a multiple form filing, use the dominant type from these choices: APP - application; CER - certificate; COF - coverage form; DPS - declaration page; END - endorsement; POJ - policy jacket; ORG - Companies adopting an Advisory or Rating Organization's filing. Example: If you are submitting a policy as well as endorsements, a declaration page and an application, you would select "POL" for policy.: NA

<b>SERFF Tracking #:</b>	ACEH-128868716	<b>State Tracking #:</b>	ACEH-128868716	<b>Company Tracking #:</b>	13-MR-2010290
<b>State:</b>	Illinois	<b>Filing Company:</b>	ACE American Insurance Company		
<b>TOI/Sub-TOI:</b>	11.0 Medical Malpractice - Claims Made/Occurrence/11.0027 Psychology				
<b>Product Name:</b>	13-MR-2010290				
<b>Project Name/Number:</b>	Premium Installment Fee Filing - Psychologists Program/13-MR-2010290				

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Gayle Neuman	02/01/2013	02/01/2013

<b>State:</b>	Illinois	<b>Filing Company:</b>	ACE American Insurance Company
<b>TOI/Sub-TOI:</b>	11.0 Medical Malpractice - Claims Made/Occurrence/11.0027 Psychology		
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## Disposition

Disposition Date: 02/01/2013  
Effective Date (New): 01/31/2013  
Effective Date (Renewal): 01/31/2013  
Status: Filed

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Explanatory Memorandum		Yes
Supporting Document	Form RF3 - (Summary Sheet)		Yes
Supporting Document	Certification		Yes
Supporting Document	Request to Maintain Data as Trade Secret Information		Yes
Supporting Document	Manual		Yes
Rate	IL rating guidelines		Yes

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## Rate/Rule Schedule

Item No.	Schedule Item Status	Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing Number	Attachments
1		IL rating guidelines	1	New		IL Rating Guidelines Installments -final 1-28-13.pdf

**ACE AMERICAN INSURANCE COMPANY**  
**PSYCHOLOGISTS PURCHASING GROUP ASSOCIATION**  
**RATING GUIDELINES**  
**OCCURRENCE PSYCHOLOGISTS PLAN**  
**CLAIMS MADE PSYCHOLOGISTS PLAN**  
**ILLINOIS AMENDMENT**

- I. Rule 18. Premium Payment Installments for both individuals and groups is deleted and replaced by the following:

18. Premium Payment Installments

- a. A quarterly installment premium payment plan shall be offered as follows: (1) an initial payment equal to 25% of the premium due at policy inception; and (2) a second, third and fourth payment equal to 25% of the premium due 3, 6 and 9 months from policy inception, respectively. There is a \$4.50 installment charge added to each payment.
- b. A semi-annual installment premium payment plan may be offered as follows: (1) an initial payment equal to 50% of the premium due at policy inception; and (2) a second payment equal to the remaining 50% balance will be billed within 6 months. There is a \$4.50 installment charge added to each payment.

The Company will not offer such premium installment plans to insureds whose annual premiums are less than \$500, or for premium for any extension of a reporting period of claims made policies.

The Company shall offer such premium installment plans to insureds in the initial offer of the policy; thereafter, the Company may, but need not re-offer such payment plan, but if an insured requests such payment plan at a later date, the Company shall make it available.

Additional or premium resulting from changes to the policy shall be billed or returned immediately as a separate transaction.

The installment charge is not considered premium.

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## Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Explanatory Memorandum		
Comments:			
Attachment(s):			
Filing Memo - IL final 1-28-13.pdf			
		Item Status:	Status Date:
Bypassed - Item:	Form RF3 - (Summary Sheet)		
Bypass Reason:	NA		
		Item Status:	Status Date:
Bypassed - Item:	Certification		
Bypass Reason:	NA		
		Item Status:	Status Date:
Bypassed - Item:	Request to Maintain Data as Trade Secret Information		
Bypass Reason:	NA		
		Item Status:	Status Date:
Satisfied - Item:	Manual		
Comments:	Acknowledged		



**ACE American Insurance Company**  
**Atlantic Employers Insurance Company**  
Psychologists Professional Liability Program  
Company Filing Number 13-MR-2010290  
Filing Memorandum

ACE American Insurance Company is filing installment fees for premium billing plans for new and renewal business, applicable to its currently approved Psychologists' Professional Liability program, in the amount of \$4.50. This installment charge would be applied to the initial down payment, along with any subsequent installment payments. All installment plans are optional, and the policyholder has the ability to pay the premium in full without incurring any installment fees.

The installment payment plans options are:

- a. A quarterly installment premium payment plan shall be offered as follows: (1) an initial payment equal to 25% of the premium due at policy inception; and (2) a second, third and fourth payment equal to 25% of the premium due 3, 6 and 9 months from policy inception, respectively. There is a \$4.50 installment charge added to each payment.
- b. A semi-annual installment premium payment plan may be offered as follows: (1) an initial payment equal to 50% of the premium due at policy inception; and (2) a second payment equal to the remaining 50% balance will be billed within 6 months. There is a \$4.50 installment charge added to each payment.

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